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FORM			Art Unit		lbbetson, James 2879				
			Examiner Name		Anthony T.				
	all correspondence after initial Pages in This Submission	21	Attorney Docket Number	P0285US-	P0285US-7				
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T IIII Name	KOPPEL, PATRICK, HEY	/BL & DA\	WSON			_			
Signature	C) AOYU		444						
Printed name	JAYE G. HEYBL	,							
Date	11/17/08			Reg. No.	42,661				
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the date shown b	e as illst class mait ill all en	ivelupe au	- the second second						
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Chresisk No. 2979		ons are required to re	U.S. Patent and Tr	ademark Offic	e; U.S. DEPARTME	010. OMB 0651-0032 ENT OF COMMERCE OMB control number	
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Feed to cuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number	10/786,7	0/786,755		
FEE TRANSMITTAL			Filing Date	02/24/20	004		
For FY 2009			First Named Inventor Ibber		obetson, James		
			Examiner Name Perry, Anthony T.				
Applicant claims small en	tity status. See 37	7 CFR 1.27	Art Unit				
TOTAL AMOUNT OF PAYME	NT (\$)	1110	Attorney Docket No.				
METHOD OF PAYMENT (check all that ap	ply)					
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FEE CALCULATION							
1. BASIC FILING, SEARCH	H, AND EXAMI	NATION FEES					
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Application Type	Fee (\$) Fee (\$)				F(\$)	ees Paid (\$)	
Utility	330 165	540	270 22	20 11	0		
Design	220 110	100	50 14	40 7	0		
Plant	220 110	330	165 1'	70 8	.5		
Reissue	330 165	540	270 6:	50 32	.5		
Provisional	220 110	0	0	0	0		
2. EXCESS CLAIM FEES					ee (\$) Small		
Fee Description Each claim over 20 (inc	ludina Reissues)		_		26	
Each independent claim					220 1	10	
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Indep. Claims Ex	xtra Claims	Fee (\$) Fee	Paid (\$)	_			
4 - 3 or HP = 0 x 220 = 0 HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): PETITION FOR THREE MONTH EXTENSION 1110							
SUBMITTED BY							
Signature	X XII		Registration No. (Attorney/Agent) 42,661		Telephone (805) 373-0060	
Name (Print/Type) JAYE G. HEYBL Date 11/17/08							

PTO/SB/17 (10-08)

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Check No. 29715 17 2008 Under the Paperwork Reduction Act of 1995. no TRANSMITTAL FORM	Persons are required to respond to a consider Application Number Filling Date First Named Inventor Art Unit Examiner Name	Patent and Tradem	ark Office; t	PTO/SB/21 (10-08) through 11/30/2008. OMB 0651-0031 J.S. DEPARTMENT OF COMMERCE displays a valid OMB control number.				
(to be used for all correspondence after initial filin Total Number of Pages in This Submission 21	Attorney Docket Number	P0285US-7	285US-7					
	ENCLOSURES (Check all	that apply)						
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence of Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Circenses	on Address ✓	Appea of Appea (Appea (Appea) Propri Status Other below	Allowance Communication to TC al Communication to Board peals and Interferences al Communication to TC al Notice, Brief, Reply Brief) etary Information a Letter Enclosure(s) (please Identify): DSTCARD				
SIGNATU	RE OF APPLICANT, ATTO	RNEY, OR A	GENT					
Firm Name KOPPEL, PATRICK, HEYBL	& DAWSON							
Signature	Signature Signature							
Printed name JAYE G. HEYBL								
Date 11/17/08 Reg. No. 42,661								
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Typed or printed name MARIANNE MIDDLE	ETON		Date	11/17/08				

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Fees presurant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nu	Application Number 10/786,755			
FEE TRANSMITTAL				Filing Date		02/24/2004		
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				Examiner Nam		Ibbetson, James		
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warning: Informa	Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULA								
1. BASIC FILIN	IG, SEARCH, AN FILIN	ND EXAMI NG FEES Small Er	SEAR	RCH FEES Small Entity	EXAMINA	TION FE	rv I	
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Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Small Entity Fee (\$) Fee (\$) 220 110								
Muitiple dep	oendent claims Extra C	laims	Fee (\$) Fee	e Paid (\$)		390 Multipl	195 e Dependent Claims	
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SUBMITTED BY		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 		Pagietration No.		Tala	- L	
Signature) ()	X 4		Registration No. (Attorney/Agent)	42,661	Tele	phone (805) 373-0060	

Date 11/17/08 Name (Print/Type) JAYE G. HEYBL

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